24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 5 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
Senate Majority PAC	C C00484642				
Check if 24-hour report 48-hour report Mew report Amends report filed on Amends report filed on Amends report 148-hour report					
Full Name of Payee Ambrosino Muir Hansen Crounse	Date of Public Distribution/Dissemination				
Mailing Address 500 Sansome St	10 26 2016 Amount				
Ste 201					
City State Zip Code San Francisco CA 94111-3215	35990.00 Transaction ID: VN7GBA6HQ54 Data of Dickurament or Obligation				
Purpose of Expenditure Direct Mail - Estimate Category/ Type	Date of Disbursement or Obligation				
Name of Federal Candidate	Office Sought: House District:				
Bayh, Evan, , , Oppose	President Senate State: IN				
Calcificat Total to Date	Disbursement For: Primary General Other (specify)				
Full Name of Payee Chambers Lopez Strategies	Date of Public Distribution/Dissemination				
Mailing Address PO Box 5539	Amount				
City State Zip Code	6866.52				
Arlington VA 22205-0039	Transaction ID : VN7GBA6HQ21 Date of Disbursement or Obligation				
Purpose of Expenditure Online Advertising - Estimate Category/ Type	M = M / D = D / Y = Y = Y				
Name of Federal Candidate Support	Office Sought: House District:				
Heck, Joe, , ,	President Senate State: NV				
	Disbursement For: Primary General Other (specify) □ Primary General				
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
	4 4				
(c) TOTAL Independent Expenditures	>				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Lambe, Rebecca, , , [Electronically Filed] Date	10 27 2016				
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	include Ly	FOR SE OF FORM 24/48		
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
3	enate Majority PAC	C C00484642		
Ch	eck if X 24-hour report 48-hour report X New report Amends report filed	on Mam / Dad / Yayayay		
٦	Full Name of Payee	Date of Public Distribution/Dissemination		
	Chambers Lopez Strategies	10 26 / Y Y Y Y Y Y		
	Mailing Address PO Box 5539	Amount		
	City State Zip Code	6866.52		
	Arlington VA 22205-0039	Transaction ID : VN7GBA6HQ38 Date of Disbursement or Obligation		
	Purpose of Expenditure Online Advertising - Estimate Category/ Type	M = M / D = D / Y = Y = Y		
	Name of Federal Candidate Support Office	e Sought: House District:		
	Trump, Donald, J., ,	President Senate State:		
	Calcindar Toda To Bato	ursement For: Primary X General		
	Per Election for Office Sought 1732817.39 2016	Other (specify) ▶		
	Full Name of Payee FUSE	Date of Public Distribution/Dissemination		
	Mailing Address 802 N 1st St	10 26 2016		
	Mailing Address 802 N 1st St	Amount		
	City State Zip Code	363.00		
	Saint Louis MO 63102-2529	Transaction ID : VN7GBA6HQ62 Date of Disbursement or Obligation		
	Purpose of Expenditure Media Production Costs - Estimate Category/ Type	M = M / D = D / Y = Y = Y		
	Name of Federal Candidate Support Offic	e Sought: House District:		
	Masto, Catherine, Cortez, , Oppose	President Senate State: NV		
	Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary General Other (specify) Other (specify) Other (specif		
(a) SUBTOTAL of Itemized Independent Expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
	(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
		0 27 2016		
	Signature			

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OF

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	itti EXI EITE	TIONES		PAGE 3 OF 5 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)			FEC I	DENTIFICATION NUMBER ▼	
Senate Majority PAC			C	C00484642	
Check if 24-hour report 48-hour report Mew report Amends report filed on					
Full Name of Payee			Date of Publ	ic Distribution/Dissemination	
Precision Network, LLC			10 N	26 / 2016	
Mailing Address 1140 Connecticut Ave NW			Amount		
Ste 800	01-1-	75.0.1.		44700000	
City	State DC	Zip Code 20036-4010	Transaction	147692.32 ID: VN7GBA6HQ70	
Washington	DC	20036-4010		ursement or Obligation	
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M	/ D D / Y Y Y Y	
Name of Federal Candidate		Support	Office Sought:	House District:	
Toomey, Patrick, J., ,		X Oppose	President	Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought	, , ,	17844880.45	Disbursement For: 2016 Other (s	Primary ✗ General	
Full Name of Payee				ic Distribution/Dissemination	
Precision Network, LLC			10	/ DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1140 Connecticut Ave NW				20 2010	
Ste 800			Amount		
City	State	Zip Code		97307.70	
Washington	DC	20036-4010		D: VN7GBA6HQ88 oursement or Obligation	
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M	/ D D / Y Y Y Y	
Name of Federal Candidate		Support	Office Sought:	House District:	
Burr, Richard, , ,		x Oppose	President	Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought	7	1169443.99	Disbursement For: 2016 Other (s	Primary X General pecify) ▶	
(a) SUBTOTAL of Itemized Independent Expendit	urae			245000.02	
(a) COLICE OF HOMEZON Mappellacine Exponent			-	243000.02	
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Lambe, Rebecca, , ,	[Electron	nically Filed] Date	10 / 27	2016	
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)					
Senate Majority PAC	C C00484642				
	V				
Check if X 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee Ralston Lapp Media	Date of Public Distribution/Dissemination				
Mailing Address 1054 31st St NW	10 26 2016				
Ste 430	Amount				
City State Zip Code	2751.66				
Washington DC 20007-6042	Transaction ID : VN7GBA6HQ46 Date of Disbursement or Obligation				
Purpose of Expenditure Media Production Costs - Estimate Category/ Type	M M / D D / Y Y Y Y				
	Sought: House District:				
Young, Todd, , ,	President Senate State: IN				
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For:				
Full Name of Payee	Date of Public Distribution/Dissemination				
Waterfront Strategies	10 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 3050 K St NW	Amount				
Ste 100	, unduit				
City State Zip Code	147046.50				
Washington DC 20007-5108	Transaction ID : VN7GBA6HPZ7 Date of Disbursement or Obligation				
Purpose of Expenditure Media Buy - Estimate Category/ Type	M M / D D / Y Y Y Y				
Name of Federal Candidate Support Office	Sought: House District:				
Heck, Joe, , ,	President Senate State: NV Senate				
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary X General Other (specify) ▶				
	(-F-21)				
(a) SUBTOTAL of Itemized Independent Expenditures	149798.16				
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7				
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Lambe, Rebecca, , , [Electronically Filed] Date Signature	0 27 2016				
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Senate Majority PAC	C C00484642			
Check if 24-hour report 48-hour report New report Amends	s report filed on			
Full Name of Payee	Date of Public Distribution/Dissemination			
Waterfront Strategies	10 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 3050 K St NW	Amount			
Ste 100	Allouit			
City State Zip Code	147046.50			
Washington DC 20007-5108	Transaction ID: VN7GBA6HQ05 Date of Disbursement or Obligation			
Purpose of Expenditure Media Buy - Estimate Category/ Type	M = M / D = D / Y = Y = Y			
Name of Federal Candidate Supp	ort Office Sought: House District:			
Trump, Donald, J., ,	se President Senate State:			
Calendar Year-To-Date Per Election for Office Sought 1732817.39	Disbursement For: Primary Seneral 2016 Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
Waterfront Strategies	M M / D D / Y Y Y Y			
Mailing Address 3050 K St NW	10 26 2016			
Ste 100	Amount			
City State Zip Code	225599.00			
Washington DC 20007-5108	Transaction ID: VN7GBA6HQ13 Date of Disbursement or Obligation			
Purpose of Expenditure Media Buy - Estimate Category/ Type	M M / D D / Y Y Y Y			
Name of Federal Candidate Supp	ort Office Sought: House District:			
Young, Todd, , ,	se President X Senate State: IN			
Calendar Year-To-Date Per Election for Office Sought 4472542.49	Disbursement For: ☐ Primary			
(a) SUBTOTAL of Itemized Independent Expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	817529.72			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Lambe, Rebecca, , , [Electronically Filed]	Date 10 27 2016			
Signature				

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